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A

Dissertation

on

Catarrhus Sensilis

by

Alexander E. Horsach

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The human constitution undergoes at different periods of life, various and remarkable changes, which are recognised by Physiologists under the appellation of Climacterics.

These remarkable epochs the Greeks considered five in number, and from the regular gradation which they exhibit in the human system, they thence denominated them climacterics, deriving the name from the word Κλίμαξ signifying gradation.

They considered the seventh year as the first climacteric, the twenty first the second, the forty-ninth the third, the sixty-third the fourth, and eighty-first the fifth. The two last they denominated the grand climacterics, being those in which the life of man was supposed to have consummated itself, and beyond which nothing was to be done but to make preparation for the grave.

In some instances the changes referred to have been productive of favourable issue to the system, but for the most part they are in themselves morbid, or are introductory to the formation of diseases: this is so frequently the case, that Sir Henry Halford has accordingly considered them as constituting disease, which he

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hence calls marasmus-climacterius, the same appellation has been adopted by that learned nosologist Dr John Mason Good. It is true that in advanced life, even after those periods, denominated the grand climacterics, have arrived, wonderful and salutary changes have taken place; a most extraordinary invigoration of the powers of the body and mind has occasionally shown itself; e.g. persons, who had lost the sense of hearing upwards of twenty years, have been known to recover it, others have as unexpectedly recovered their lost vision, and even afterwards enabled to see without the aid of glasses, while others under this new impulse given to the constitution, have undergone a second dentition, and have recovered even new and entire sets of teeth, and in the place too of those that had been gradually lost through life; and according to Forestus the hair has shown a similar regeneration; this last fact is less surprising as we know the hair,

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possessing the properties of a vegetable as well as an animal nature, to grow and change colour even after death.
But at this advanced period of life we more commonly see changes less favourable and which prove injurious and destructive of the powers of the constitution -
At this time the strength, the spirits, the appetite, the digestion, the passions, sleep, and indeed most of the functions of the body, and mind usually exhibit a manifest declension.
In women, it is remarked by some writers, that these changes are of less frequent occurrence, and are less manifest than in men, as says Sir Henry Halford who ascribes the fact to the greater exposure of men than women: this I believe is not the true cause; another explanation occurs to me as more satisfactory viz - That the accumulation of blood in the female habit, by the cessation of the menses, and the consequent excitement which that change imparts to the system, renders women less likely to experience this sudden expenditure of the powers of life. The exposure however of men to a check of the functions of the surface of the body and their

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less temperate habits I believe have considerable agency in the production of the diseases of old age.

Among the more prominent of this class of diseases is the one I have selected as the subject of the following Dissertation The Catarrh of old-age or Catarrhus Senilis

History of the Disease

With regard to the history of this disease, I remark first, that it is more especially peculiar to advanced life and for the most part makes its first appearance without any apparent exciting cause: secondly It comes with most violence in those of the nervous temperament, and where such sensibility exists in a remarkable degree, it also appears at a much earlier period of life, than in those of a different temperament.

Thirdly, It appears also with most violence and comes on earlier in those of a feeble delicate constitution ~~whether~~ whether naturally so or induced by great mental exertion, by bodily labour, or by disease.

The intemperate, if not cut off by more acute disease are ~~the~~ sure like Lord Ogilvie in the play* to manifest

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this evidence of debauchery and premature old age.
Fourthly, It attacks those with most severity who are predisposed to pulmonary complaints or who have an irritable state of the Lungs from previous attacks of disease in those organs, such as Haemoptysis, Catarrh, Pleurisy, Peripneumony &c. Induced by this predisposition, the consequence of an attack of hoemoptoe in early life, it appeared early in the case of the late Dr Rush. In his letters which I have had an opportunity of perusing written many years before his death he speaks of Catarrhus Senilis as the only exception to his enjoyment of perfect health.
Fifthly, Debauchery also early induces this irritable state of the Lungs. A very remarkable instance of this local affection of the Chest occurred a few years since in the City of New-york. A sedentary life, chiefly spent at the card table, with loss of sleep, followed by an impaired state of the digestive organs, produced this disease in a very remarkable degree and at a much earlier period of life than otherwise would have been expected. Again, it is to be observed, that those

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are circumstances which in a ~~fav~~ peculiar manner prevent the commence of this disease: e.g. Those of a sanguine temperament, of an athletic frame of body, a well formed chest, whose occupation or pursuits have led them to great exertion in the open air, are frequently exempt from this evidence of old age until they have arrived at a very advanced period of life. Secondly. The inhabitants of a warm climate are usually exempt from this attendant upon old age. Thirdly. In like manner those who are in the habit of using the warm bath, usually escape, these irritations of the Chest to a very advanced period of life - we see this exemplified in a remarkable manner in the south of Europe particularly among the French and Italians.

Symptoms

The first symptoms of Catarrhus Senilis shew themselves at the approach of cold weather; and to the change of season the disease is usually ascribed as the exciting cause, being considered as the commencement

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of an ordinary catarrh, to which it certainly bears great resemblance. Doubtless, the cool weather of autumn has its agency, for in summer, the disease undergoes a manifest remission. The disease also becomes first apparent in the morning, when the cough is most troublesome and dry, the expectoration being obtained with great difficulty.

The cough comes on in paroxysms which continues many minutes, some what similar to the reiterated efforts in whooping cough; at length, with great difficulty an expectoration follows of an adhesive sharp phlegm; more or less of a similar acid Rheum takes place at the same time from the nose, and eyes, followed by a soreness which is apt to become permanent and troublesome; hence probably sore eyes are so frequently associated with old age as connected with and proceeding from, a morbid state of the excretions.

The skin too becomes remarkably dry and to a degree shrivelled and covered with a dry scurf or dandrif.

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The expection from the bronchia and lungs is gradually increased by the irritation and frequent returns of the cough, and as the body becomes enfeebled, phlegm accumulates in the cellular parts of the lungs, so as in some degree to impede the due circulation of the blood through the pulmonary vessels, and thereby to interrupt the perfect decarbonisation of that fluid - analogous to the impeded circulation through the lungs in the advanced or passive stage of peripneumony.
In this manner too death sometimes very unexpectedly takes place, and in feeble old age, without a struggle, the interchange between the blood and the atmosphere being suddenly cut off by the interposing mass of phlegm that is accumulated under ordinary circumstances a slight degree of febrile action is the attendant upon this complaint, the cheek exhibits more or less of a hectic flush, and in some cases a livid purple appearance of the face itself, with a correspondent quickness of circulation and heat of the surface especially in the palms of the hands an accumulation of blood sometimes takes place upon the brain, producing great heat and sense of burning, at other times giddiness and sometimes coma or a propensity

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to sleep. A patient of my fathers frequently complained of a sense of burning upon the top of the head attended with vertigo, both of which were increased during the paroxysm of coughing and indeed were probably created by ~~the~~ his frequent fits of coughing. The chest also shews more or less of oppression, sometimes exhibiting an asthmatic fulness; in one instance this appeared to be the predominant symptom. The heart too occasionally partakes of the irritation, it becomes irregular in its action owing to the interruption in the pulmonary circulation. When these irritations of the Brain and whole system appear there is also more or less disturbance of the digestive organs especially loss of ~~appetite~~ appetite, cardialgia and flatulence.

Remote Causes

The remote causes have been already enumerated in the history of the disease viz a Debilitated habit of body, whether constitutional or acquired, the nervous temperament, a variable climate, Debauchery and Disease:

When this Catarrh appears early in life it is generally remarked to appear as a consequence of most of the predisposing and exciting causes making up the forgoing enumeration.

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Proximate cause.

We are now led to ask the more important question what is the proximate cause of Catarrhus Senilis, for upon the solution of this question depends the principle upon which the Physician is to proceed in palliating or in removing the disease.

I have never met with a satisfactory reply to this question or a solution of the symptoms which have been enumerated. When we keep in view the facts that have been related as it regards the subjects of the disease, the causes which induce it, the season of the year at which it commences, the variable climate in which it is of most frequent occurrence, we are prepared to believe, that the proximate cause in part consists in a general debility of the whole system, and an increased sensibility of the Lungs in common with that of the other parts of the body the effects of such relaxation. The result of the debility thus induced is that the determination to the surface of the body is thereby lessened, an accumulation of the fluids in the head and Chest is the consequence, an increased fulness therefore of the heart and larger vessels will necessarily affect the head and Lungs both of which manifest the irritations

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which are attendent upon catarrhus senilis. Are not the dryness of the skin as well as the heat and other febrile symptoms generally met with in this state of body thus in part satisfactorily accounted for?

The consequence of ~~which~~ such determination is necessarily an increased secretion from the bronchial and from the pulmonary vessels terminating upon the surface of the Lungs, I now speak of the quantity of fluids and those operating as such mechanically.

But there is another source of this peculiar irritation on the Lungs attendant upon advanced age; I refer to the quality of the circulating fluids as well as their mechanical accumulation and the consequent increase of the excretions from the head and Chest. It is a fact well known to the Physiologist that it is the peculiar province of the skin, as well as the kidneys, to separate from the circulating mass of fluids various saline and earthy materials.

Modern Chemistry has very clearly made known to us the ingredients which constitute those discharges* These being retained by the diminished diameter and obstruction of the extreme vessels, What follows? I answer, an accumulation

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of those ingredients in the blood unless they may be ejected from the constitution by the other outlets viz. the kidneys the bowels and other exhaling surfaces including the extensive surface of the lungs, not that there is a direct transportation of the peculiar matter that ought to be thrown off from the skin, to the Lungs, but an accumulation of it in the whole circulating mass, hence more of it necessarily shews itself in the other excretions especially where those excretions are most abundant as the kidneys and bowels and in old age the Lungs.—

But do the excretions of the kidneys also manifest this change in the properties of the urine? The reply all concur in that they do, hence then we are prepared to expect the great irritation of the bladder and kidneys which is so frequently met with in old age, hence gravel and stone appear more frequently and in advanced life, hence the acid urine and the painful passage of it especially in the winter season, hence too arises the earthy or bony deposits which take place in different parts of the body, in the valves of the heart, in the coronary and other arteries of the body, in the pineal gland, in the membranes of the brain, Lungs, In the pericardium &c. To the same cause we are to attribute

* See Bailies morbid anatomy

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* Willis Plates
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The propensity to eruptive diseases as Erisipelas, Pemphigus Senilis and other diseases of the skin which more especially belong to old age.

But we see an exemplification of this change in the urinary secretion in most persons in the cooler season; every person attending to these changes and the influence of temperature upon the functions of the kidneys, must have observed the clear pellucid urine that is voided in the summer season, while that of the same person, in winter, is loaded with earthy and saline materials: doubtless owing to the suppression of the discharge of lithic matter that ordinarily passes through the surface of the body.‡ The same thing occurs in the winter of life when the functions of the skin is to a certain degree suspended, at least impaired from the obliteration of many of the small vessels of the surface, and I might illustrate the same fact by a case of which has fallen under my notice in the New York Hospital when mercury taken to a considerable extent in syphilis became deposited in the cells of the bones, instead of being discharged by the emunctories of the body: this was illustrated by dissection the bone being still preserved by my fellow student

* Willens Plates of the Skin

‡ See Wilson on Dispepsia and gravel

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Mr Porchor several cases have been related by different writers of a similar nature —

The question then presents itself, can the secretions which take place upon the extensive surface of the bronchia and the Lungs be free from those acid materials which show themselves in the other discharges of the body, and which have no longer their natural outlet? I believe not, have we not reason then to conclude that the peculiar quality of the fluids as well as the inordinate quantity, creates the irritation attendent upon tubes Secreted. —

Treatment

The indications to be derived from this view of the subject are plain: first, to preserve the tone of the whole system, and thereby the secretions by the extreme vessels upon the surface of the body, by which the determination to the Chest is diminished, hence appears the importance of exercise, nutritious and stimulating food especially animal food with the usual condiments of the table, and the moderate use of wine and other stimulating drinks especially when the person may have been habituated to their use; hence to the importance of bitters, chalybeates, and other tonics

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to preserve the healthy action in the digestive organs and of the whole system:

Secondly The Indication is to preserve open all the other excretions of the system that the discharge by the Lungs may not be increased; hence also we infer the importance of warm days, flannel worn next the surface of the body and that frequently changed, hence the use of friction by the flesh brush and the importance of warm bathing both as an emollient to the surface as well as an excitant of its numerous excretions; for the same reason the bowels should be kept open and attention paid to the kidneys: such are the general means of preventing and indeed of removing the evils attendant upon this disease.

Thirdly Another Indication is to preserve the tone of the lungs themselves and thereby to lessen the morbid sensibility to the more immediate agent or exciting causes of the disease. This is to be accomplished by the stimulant expectorants and other remedies ordinarily directed in the treatment of Chronic Catarrh.—

By